

UNITED STATES BANKRUPTCY COURT
DISTRICT OF DELAWARE

PROOF OF CLAIM



YOUR CLAIM IS SCHEDULED AS:
Schedule/Claim ID s5998

Name of Debtor:
General Media Communications, Inc.

Case Number:
13-12417

Amount/Classification
\$2,450.00 Unsecured

NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.

Name of Creditor (the person or other entity to whom the debtor owes money or property):

Incredible Features, Inc

Name and address where notices should be sent:

INCREDIBLE FEATURES
4910 1/4 MCCONNELL AVE
LOS ANGELES, CA 90066

33253522001528

RECEIVED

DEC 17 2013

BMC GROUP

The amounts reflected above constitute your claim as scheduled by the Debtor or pursuant to a filed claim. If you agree with the amounts set forth herein, and have no other claim against the Debtor, you do not need to file this proof of claim EXCEPT as stated below.

If the amounts shown above are listed as Contingent, Unliquidated or Disputed, a proof of claim must be filed.

If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.

THIS SPACE IS FOR COURT USE ONLY

Creditor Telephone Number () email:

Name and address where payment should be sent (if different from above):

Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.

Check this box to indicate that this claim amends a previously filed claim.

Court Claim Number (if known):

Filed on: _____

Payment Telephone Number () email:

1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ _____

If all or part of your claim is secured, complete item 4.

If all or part of your claim is entitled to priority, complete item 5.

Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.

2. BASIS FOR CLAIM:

(See instruction #2)

3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR:

3a. Debtor may have scheduled account as:

(See instruction #3a)

3b. Uniform Claim Identifier (optional):

(See instruction #3b)

4. SECURED CLAIM: (See instruction #4)

Check the appropriate box if your claim is secured by a lien on property or a right of set off, attach required redacted documents, and provide the requested information.

Nature of property or right of setoff:

Describe:

Real Estate Motor Vehicle Other _____

Value of Property: \$ _____

Annual Interest Rate: _____ % Fixed or Variable (when case was filed)

Amount of arrearage and other charges, as of time case filed, included in secured claim, if any: \$ _____

Basis for Perfection: _____

Amount of Secured Claim: \$ _____

Amount Unsecured: \$ _____

5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507(a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.

Amount entitled to priority: \$ _____

You MUST specify the priority of the claim:

Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).

Up to \$2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(7).

Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).

Wages, salaries, or commissions (up to \$12,475*), earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(4).

Other - Specify applicable paragraph of 11 U.S.C. § 507(a) (_____).

PMGI Holdings POC



00197

* Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

6. CREDITS: The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)

7. DOCUMENTS: Attached are redacted copies of documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements, or, in the case of a claim based on an open-end or revolving consumer credit agreement, a statement providing the information required by FRBP 3001(c)(3)(A). If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. If the claim is secured by the debtor's principal residence, the Mortgage Proof of Claim Attachment is being filed with this claim. (See instruction #7, and definition of "redacted").

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

DATE-STAMPED COPY: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

The original of this completed proof of claim form must be sent by mail or hand delivered (FAXES NOT ACCEPTED) so that it is actually received on or before 5:00 pm, prevailing Eastern Time on November 13, 2013 for Non-Governmental Claimants OR on or before March 17, 2014 for Governmental Units.

BY MAIL TO:
 BMC Group, Inc
 Attn: FriendFinder Networks Inc. Claims Processing
 PO Box 3020
 Chanhassen, MN 55317-3020

BY MESSENGER OR OVERNIGHT DELIVERY TO:
 BMC Group, Inc
 Attn: FriendFinder Networks Inc. Claims Processing
 18675 Lake Drive East
 Chanhassen, MN 55317

8. SIGNATURE: (See instruction #8)

Check the appropriate box.

- I am the creditor. I am the creditor's authorized agent. I am the trustee, or the debtor, or their authorized agent. I am a guarantor, surety, indorser, or other codebtor. (See Bankruptcy Rule 3005.)
 (See Bankruptcy Rule 3004.)

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name: Jeffery R Wannen
 Title: owner CEO Incredible Features
 Company: Incredible Features Inc
 Address and telephone number (if different from notice address above):

[Signature] Nov 1, 2013
 (Signature) (Date)

Telephone number: _____ email: - info@ifiphoto.net
310-895-3067

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

LIST OF DEBTORS:

Debtor Name	Case Nbr	Debtor Name	Case Nbr
PMGI Holdings Inc.	13-12404-CSS	Medley.com Incorporated	13-12424-CSS
FriendFinder Networks Inc.	13-12405-CSS	NAFT News Corporation	13-12425-CSS
Argus Payments Inc.	13-12406-CSS	Penthouse Digital Media Productions Inc.	13-12426-CSS
Big Island Technology Group, Inc.	13-12407-CSS	Penthouse Images Acquisitions, Ltd.	13-12427-CSS
Blue Hen Group Inc.	13-12408-CSS	PerfectMatch Inc.	13-12428-CSS
Confirm ID, Inc.	13-12409-CSS	Playtime Gaming Inc.	13-12429-CSS
Danni Ashe, Inc.	13-12410-CSS	PPM Technology Group, Inc.	13-12430-CSS
Fastcupid, Inc.	13-12411-CSS	Pure Entertainment Telecommunications, Inc.	13-12431-CSS
Fierce Wombat Games Inc.	13-12412-CSS	Sharkfish, Inc.	13-12432-CSS
FriendFinder California Inc.	13-12413-CSS	Snapshot Productions, LLC	13-12433-CSS
FriendFinder Ventures Inc.	13-12414-CSS	Streamray Inc.	13-12434-CSS
FRNK Technology Group	13-12415-CSS	Streamray Studios Inc.	13-12435-CSS
General Media Art Holding, Inc.	13-12416-CSS	Tan Door Media Inc.	13-12436-CSS
General Media Communications, Inc.	13-12417-CSS	Traffic Cat, Inc.	13-12437-CSS
General Media Entertainment, Inc.	13-12418-CSS	Transbloom, Inc.	13-12438-CSS
Global Alphabet, Inc.	13-12419-CSS	Various, Inc.	13-12439-CSS
GMCI Internet Operations, Inc.	13-12420-CSS	Video Bliss, Inc.	13-12440-CSS
GMI On-Line Ventures, Ltd.	13-12421-CSS	West Coast Facilities Inc.	13-12441-CSS
Interactive Network, Inc.	13-12422-CSS	XVHUB Group Inc.	13-12442-CSS
Magnolia Blossom Inc.	13-12423-CSS		

Subject: MileagePlus eTicket Itinerary and Receipt for Confirmation DV2V93

From: "United Airlines, Inc." <unitedairlines@united.com>

Date: 12/10/2013 5:40 PM

To: JEFF@INCREDIBLEFEATURES.COM

Confirmation:

DV2V93

Check-In >

United Airlines

Issue Date: December 11, 2013

Traveler	eTicket Number	Frequent Flyer	Seats
WERNER/JEFFERYMR	0162389125109	UA-BL81XXXX	---/---/---/---

FLIGHT INFORMATION

Day, Date	Flight	Class	Departure City and Time	Arrival City and Time	Aircraft	Meal
Sun, 03NOV13	CM361 I		LOS ANGELES, CA (LAX) 5:25 AM	PANAMA CITY, PANAMA (PTY) 2:59 PM		

Flight operated by COPA AIRLINES-COMPAN.

Sun, 03NOV13	CM205 I		PANAMA CITY, PANAMA (PTY) 3:48 PM	BRASILIA BR (BSB) 1:04 AM		
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Flight operated by COPA AIRLINES-COMPAN.

Fri, 13DEC13	CM204 P		BRASILIA BR (BSB) 3:33 AM	PANAMA CITY, PANAMA (PTY) 6:30 AM	737-800	
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Flight operated by COPA AIRLINES.

Fri, 13DEC13	CM360 P		PANAMA CITY, PANAMA (PTY) 7:56 AM	LOS ANGELES, CA (LAX) 12:09 PM	737-800	
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Flight operated by COPA AIRLINES.

FARE INFORMATION

Fare Breakdown

MileagePlus

MileagePlus Miles

Account Debited: Debited/

Please Accept this
document.

I was out of the country
& it didn't get mailed

Jeffrey R Wenz
hr R W



incredible features.com
unique images for the curious mind
4910 1/4 mcconnell ave los angeles ca 90066



02 1P \$000.46⁰
0002884132 DEC 13 2013
MAILED FROM ZIP CODE 90066



BMC Group INC.
Attn. FriendFinder Network Inc
Claims Processing
PO Box 3020
Chanhasan, MN 55317-3020

RECEIVED

DEC 17 2013

BMC GROUP

5531730020



